PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)		
FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			02558B-063710US		
Application Number 10/828,846			Filed April 20, 2004		
For PATTERN RECOGNITION METHOD FOR DIAGNOSIS OF SYSTEMIC AUTOIMMUNE DISEASES					
Art Unit 1631			Examiner Pablo S. Whaley		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
		Fee	Small Entity Fee		
	One month (37 CFR 1.17(a)(1))	\$130	\$65	\$	
	Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$	
	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ 1110	
	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$	
	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$	
	Applicant claims small entity status. See 37 CFR 1.27.				
	A check in the amount of the fee is enclosed.				
	Payment by credit card. Form PTO-2038 is attached.				
	The Director has already been authorized to charge fees in this application to a Deposit Account.				
	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u>				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
altomey or agent of record. Registration Number <u>41,797</u>					
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34					
June 30, 2010					
	Signature /		Date		
,	Gerald T. Gray, Reg. No. 41,797		(925) 472-5000		
	Typed or printed name Telephone Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total offorms are submitted.					